

**Mississippi State Department of Health
Bureau of Emergency Medical Services**

**SUMMARY OF MODIFICATIONS TO:
Title 15, Part 12, Subpart 31
Emergency Medical Services**

Rule Number/ Page Number	Rule Change	EXPLANATION OF CHANGE
Chapter 1 Ambulance Service Licensure		
Subchapter 1 Ambulance Service Licensure		
Rule 1.1.4	Applicants for ambulance service license must provide a roster of all employees including Medical First Responders, EMTs, EMS-DS, dispatchers, RNs <u>Emergency Vehicle Operators (EMS-Driver), EMTs, AEMTs, Paramedics, Critical Care Paramedics, RNs and Emergency Medical Dispatchers</u> , and others if appropriate. This list must include state-issued certification and/or license numbers where applicable.	MODIFIED RULE Modify language to reflect updated reporting requirements.
Rule 1.1.6	Plan must include the names of all off-line and on-line medical directors accompanied by credentials, proof of Mississippi physician licensure and controlled substances registration number. The Ambulance Service Medical Director must be approved by the State EMS Medical Director. In addition, controlled substances registration number and DEA required controlled substances registration certificate for non-hospital based paramedic <u>advanced life support</u> services for the off-line medical director. Only the lead on-line medical director or each medical control hospital need be listed. Additionally the primary resource hospital and associate receiving hospital(s); description of methods of medical control; quality assurance and skill maintenance process must be included (See Appendix 1). <i>NOTE: Revisions in the medical control plan must be submitted prior to implementation. At a minimum, medical control plans shall be resubmitted to BEMS every three (3) years for approval</i>	MODIFIED RULE Modify to reflect new AEMT level of licensure.

	<i>by the BEMS staff and the State EMS Medical Director.</i>	
Subchapter 2 Periodic inspections		
Rule 1.2.10	<u>To maintain situation awareness of coverage within Mississippi, the owner, manager or medical director of each publicly or privately owned ambulance service shall inform the State Department of Health, Bureau of EMS of any assets being placed on alert and/or deployed as part of the Federal Emergency Management Agency National Ambulance Contract immediately upon notification.</u>	<p>NEW RULE</p> <p>To require services reporting to state EMS office when activated by National Ambulance Contract in order to maintain situational awareness of resources available in state.</p>
Subchapter 5 Vehicle Standards		
Rule 1.5.8	<p>Medical, surgical, and bio-medical equipment <u>for all levels</u>: When specified, the ambulance shall be equipped with, but not limited to, the following:</p> <p>58. Automated external defibrillator (AED) (Basic <u>EMT or AEMT Level Ambulance Only</u>). AED shall have pediatric capabilities, including pediatric sized pads and cables as appropriate.</p> <p>59. <u>Glucometer or blood glucose measuring device</u></p> <p>60. <u>High Visibility Safety Apparel for Staff: Each Special Use EMS Vehicle must be equipped with high visibility safety apparel for each person staffing or participating in the operation of the vehicle. All garments must meet the requirements of the American National Standard for High Visibility Apparel ANSI/ISEA 107-2004 Performance Class 2 or Performance Class 3, or the ANSI/ISEA 207-2006 Standard. All garments must have labels, affixed by the manufacturer in accordance with the standard, that indicate compliance with the Performance</u></p>	<p>MODIFIED RULE</p> <p>Modify language to reflect current EMS licensure levels.</p> <p>Number 60 moved from Rule 1.9.3.</p>

	<u>Class 2, Performance Class 3, or 207-2006 standard</u>	
Rule 1.5.9	<p>Infectious disease precaution materials: <i>NOTE: Latex-free equipment should be available.</i> 11. <i>NOTE: In addition to the previously listed BLS regulations, the following additional ALS requirements must be met</i> c. If not stored on the ambulance, the equipment and supplies required for advanced life support at the EMT-Intermediate or EMT-AEMT or Paramedic level, must be stored and packaged in such a manner that they can be delivered to the scene on or before the response of the ALS personnel. This may be accomplished by rapid response units or other non-ambulance emergency vehicle. <i>NOTE: ALS services are required to have ALS equipment commensurate with the ALS staffing plan submitted as part of the application for service licensure</i></p>	<p>MODIFIED RULE</p> <p>Modify language to reflect current EMS licensure levels and add to add new level - AEMT.</p>
Rule 1.5.10	<p><u>The Bureau of EMS and the Committee on Medical Direction, Training, and Quality Assurance (MDTQA) will approve pharmaceuticals available for use by EMS providers. A list of ‘Required’, ‘Optional’, and ‘Transport only’ drugs for EMS providers in the State is compiled and maintained by the BEMS and the MDTQA. NOTE: An Offline Medical Director may make requests for changes to the list. These requests should be submitted in writing to the BEMS. All requests must detail the rationale for the additions, modifications, or deletions.</u></p>	<p>NEW RULE</p> <p>ADD for medications within the new AEMT Scope of Practice as defined in the <i>National EMS Scope of Practice Model</i>.</p>
Subchapter 6 <u>Paramedic Advanced EMT Required Equipment</u>		
Rule 1.6.1	<p>For the AEMT Paramedic all the equipment for the EMT as previously listed plus the following equipment and supplies: 10. Airway a. Rescue Airway (e.g. Combitube, Extraglottic Device). - <u>Adult</u></p>	<p>MODIFIED RULE</p> <p>Modify for medications within the new AEMT Scope of Practice as defined in the <i>National EMS Scope of Practice Model</i>.</p>

	<ul style="list-style-type: none"> b. <u>Rescue Airway (e.g. Combitube, Extraglottic Device) – Pediatric (AEMT Only)</u> c. End-tidal CO2 Detectors (may be made onto bag valve mask assemblies or separate) d. Pulse Oximeter with pediatric and adult probes. (Pulse ox may be independent or integrated with a monitor/defibrillator or other device). <p>11. AED 11. Nebulizer</p>	
Subchapter 7 Paramedic <u>Required Equipment</u>		
Rule 1.7.1	<p>Airway All the equipment and supplies listed above plus the following additional equipment and supplies:</p> <p>2. Endotracheal tubes, 2 each sizes 2.5-5.5 mm uncuffed and 2 each sizes 6-8 mm cuffed. Other sizes optional</p>	<p>MODIFIED RULE</p> <p>Modify to reflect current evidenced based practice (National Model EMS Clinical Guidelines, Version 2.0).</p>
Rule 1.7.2	<p>Drugs: The Bureau of EMS and the Committee on Medical Direction, Training, and Quality Assurance (MDTQA) will approve pharmaceuticals available for use by EMS providers. A list of ‘Required’, ‘Optional’, and ‘Transport only’ drugs for EMS providers in the State is compiled and maintained by the BEMS and the MDTQA. All pharmaceuticals carried and administered by EMS providers in the state must be in the 41 classifications of drugs as defined by the 1998 EMT-Paramedic National Standard Curriculum. A current list of fluids and medications approved for initiation and transport by Mississippi EMS providers is available from the BEMS office or the BEMS website (www.msems.org). NOTE: A Offline Medical Director may make requests for changes to the list. These requests should be submitted in writing to the BEMS. All requests must detail the rationale for the additions, modifications, or deletions.</p>	<p>REMOVE Rule</p> <p>Remove language already referenced in 1.5.10.</p>

Subchapter 8 Sanitation Regulations		
Rule 1.8.2	<p>Narcotics: Certified ALS personnel (paramedics and RNs) functioning under approved medical control jurisdiction may be issued approved controlled substances for pre-hospital use upon the discretion of the off-line medical director. For ALS services that are not hospital based, the Drug Enforcement Administration (DEA) requires the off-line medical director to secure a separate CONTROLLED SUBSTANCES REGISTRATION CERTIFICATE to store, issue and prescribe controlled substances to ALS personnel. This CERTIFICATE should list the medical director as a "practitioner" at the physical address of the ambulance service where the drugs are stored. The off-line medical director will determine who may issue and administer the controlled substances and who will have access to storage of these narcotics.</p> <p>1. Controlled substances must be secured in accordance with applicable state and federal regulations. The paramedic's narcotics should be secured in a designated location when he is not on duty and actively functioning under the service's medical control. When on duty, each paramedic should keep his controlled drugs in his immediate possession or securely locked in the vehicle at all times.</p> <p>2. Whenever an order is received from medical control for administration of a narcotic, the paramedic must keep track of the vial/ampule being utilized. If the full amount of the narcotic was not administered, the remainder must be wasted in the presence of a witness and the witness must sign the patient report documenting same. The witness should preferably be a licensed health care</p>	<p>MOVED to Subchapter 9: Prescription Items Rule 1.9.4</p>

	<p>provider who is authorized to administer narcotics themselves.</p> <p>3. Narcotics should be replaced and logged within 24 hours of administration. Narcotics logs should be maintained by the ALS service. Paramedics should individually document the following minimum information in the narcotics log: Date of administration; Time of administration; Amount administered; Amount wasted; Witness to wasted amount; Patient's name; Call number; Ordering physician</p> <p>4. Any paramedic/RN that is separated from the ALS service's medical control authority shall surrender his narcotics upon demand or be subject to prosecution under applicable statutes</p>	
Rule 1.8.3	<p>Prescription Items: All ambulance services licensed by the BEMS are required to have approved medical directors. BLS ambulance services are required to have designated an off-line medical director only. These physician directors are necessary to allow the services to store and administer certain prescription items as required in the Rules and Regulations of the BEMS</p>	<p>MOVED to Subchapter 9: Prescription Items Rule 1.9.5</p>
Subchapter 9 Storage of Prescription Items:		
Rule 1.9.4	<p>Narcotics: Certified ALS personnel (paramedics and RNs) functioning under approved medical control jurisdiction may be issued approved controlled substances for pre-hospital use upon the discretion of the off-line medical director. For ALS services that are not hospital-based, the Drug Enforcement Administration (DEA) requires the off-line medical director to secure a separate CONTROLLED SUBSTANCES REGISTRATION CERTIFICATE to store, issue and prescribe controlled substances to ALS personnel. This CERTIFICATE should list the medical director as a "practitioner" at the physical</p>	<p>MOVED from Subchapter 8 Sanitation Regulations Rule 1.8.2</p>

	<p>address of the ambulance service where the drugs are stored. The off-line medical director will determine who may issue and administer the controlled substances and who will have access to storage of these narcotics.</p> <p>1. Controlled substances must be secured in accordance with applicable state and federal regulations. The paramedic's narcotics should be secured in a designated location when he is not on duty and actively functioning under the service's medical control. When on duty, each paramedic should keep his controlled drugs in his immediate possession or securely locked in the vehicle at all times.</p> <p>2. Whenever an order is received from medical control for administration of a narcotic, the paramedic must keep track of the vial/ampule being utilized. If the full amount of the narcotic was not administered, the remainder must be wasted in the presence of a witness and the witness must sign the patient report documenting same. The witness should preferably be a licensed health care provider who is authorized to administer narcotics themselves.</p> <p>3. Narcotics should be replaced and logged within 24 hours of administration. Narcotics logs should be maintained by the ALS service. Paramedics should individually document the following minimum information in the narcotics log: Date of administration; Time of administration; Amount administered; Amount wasted; Witness to wasted amount; Patient's name; Call number; Ordering physician</p> <p>Any paramedic/RN that is separated from the ALS service's medical control authority shall surrender his narcotics upon demand</p>	
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Rule 1.9.5	Prescription Items: All ambulance services licensed by the BEMS are required to have approved medical directors. BLS ambulance services are required to have designated an off-line medical director only. These physician directors are necessary to allow the services to store and administer certain prescription items as required in the Rules and Regulations of the BEMS	MOVED from Subchapter 8 Sanitation Regulations Rule 1.8.3
Subchapter 11 Required Personnel		
Rule 1.11.1	Every ALS ambulance, when responding to and transporting patients requiring care beyond the basic life support level, must be occupied by a driver with a valid EMS driver's license and one (1) person who possesses a valid <u>Advanced EMT</u> or Paramedic state certificate or one (1) person who possesses a valid medical/nursing license.	MODIFIED RULE Modify language to reflect current EMS licensure levels and National EMS Certification Levels.
Rule 1.11.4	Certification of training for personnel functioning in an out-of-hospital Advanced Life Support (ALS) role may be as follows: 1. Current registration as an <u>Advanced EMT</u> or Paramedic by the National Registry of EMTs.	MODIFIED RULE Modify language to reflect current EMS licensure levels and National EMS Certification Levels.
Subchapter 12: Record Keeping		
Rule 1.12.2	A completed copy of a Patient Care Report containing Mississippi minimum EMS data set shall be left with or electronically submitted to hospital staff for all patients delivered to licensed Hospitals. If in the best interest of the public good, an immediate response to a patient is required of an ambulance delivering a patient to a licensed Hospital, a complete oral report on the patient being delivered will be given to the receiving facility and a completed copy of Patient Care Report for that patient shall be delivered to the hospital staff of the licensed Hospital within 24 hours. <u>Written</u>	MODIFIED RULE Modify language to reflect current electronic submission practice.

	exceptions may be submitted to the BEMS for consideration.	
Chapter 4 Medical First Responder		
Rule 4.9.3	Prerequisites to certification as a Medical First Responder (training obtained in Mississippi): <ol style="list-style-type: none"> 1. Age of at least 18 years. 2. Completion of the Board's approved Medical First Responder Training Program <i>(Note: This includes passage of the National Registry examination).</i> 3. National Registry certification at minimum level of First Responder 	MODIFIED RULE Modify language to reflect current application for certification practice.
Rule 4.9.4	Prerequisites to certification as a Medical First Responder (training obtained in another state): <ol style="list-style-type: none"> 1. Age of at least 18 years. 2. Completion of a Medical First Responder program which meets the minimum guidelines of the First Responder National Standard Curriculum. Provide written verification from the State of training and of current status. 3. Completion of a State-approved Medical First Responder skills course. 4. Applicant must be registered at a minimum level of First Responder by the National Registry of EMTs. This is documented by submitting a copy of the National Registry wallet card. 5. <i>NOTE: The Mississippi BEMS maintains the right to refuse reciprocity to any Nationally Registered Medical First Responder applicant if the submitted curriculum does not meet the guidelines of the national standard curriculum and those</i> 	REMOVE Rule Remove language to reflect current application for certification practice.

	<i>required by the State of Mississippi.</i>	
Chapter 6 EMERGENCY MEDIAL TECHNICIAN Subchapter 2 EMT Curriculum		
Rule 6.2.3	The current approved curriculum is the Mississippi Curriculum Framework—Emergency Medical Technician (EMT) and Paramedic as approved by the Mississippi Department of Education, Office of Career and Technical Education and the State Board for Community and Junior Colleges (SBCJC), the Mississippi Emergency Medical Services Advisory Board and the Medical Direction, Training and Quality Assurance Committee	MODIFIED RULE Modify to align with Rule 6.1.1. Repeat of 6.2.1.
Subchapter 3: Request for Approval of EMT training programs		
Rule 6.3.2	Request for approval of EMT training programs not contained on the approved list shall be sent to BEMS with evidence and verification that: 3. EMT Instructors meet the requirements of the Mississippi State Department of Education and the BEMS. There must be certification and re-certification requirements that must be met, including an evaluation of instructor terminal competencies, provided in the requested training program	MODIFIED RULE Modify language to reflect current application for certification practice.
Subchapter 10 Prerequisites to certification as an EMT (training obtained in Mississippi)		
Rule 6.10.2 —	Completion of the Board's approved Emergency Technician Training Program <i>(Note: This includes passage of the National Registry examination).</i>	REMOVE Rule Remove language to reflect current application for certification practice.
Subchapter 11 Prerequisites to certification as an EMT (training obtained in another state)		
Rule 6.11.1 —	Age of at least 18 years	REMOVE Rule Remove language to reflect current application for certification practice.

Rule 6.11.2 —	An applicant must demonstrate a need for reciprocity by submitting a Jurisdictional Medical Control Agreement from a licensed ambulance service or a facility providing basic life support service indicating the applicant is presently employed or will be employed upon moving to the state.	REMOVE Rule Remove language to reflect current application for certification practice.
Rule 6.11.3 —	Completion of an EMT program which meets the guidelines as approved by BEMS. A copy of the program curriculum and educational objectives must be submitted to an approved by the BEMS.	REMOVE Rule Remove language to reflect current application for certification practice.
Rule 6.11.4 —	Applicant must be registered as an EMT by the National Registry of EMTs. This is documented by submitting a copy of the National Registry wallet card	REMOVE Rule Remove language to reflect current application for certification practice.
<u>Subchapter 12</u> <u>Subchapter 11</u> EMT Certification		
Rule 6.12.3	The BEMS may withhold or deny an application for certification for a like period of time equal to the period of time under which a person failed to comply. Mississippi requires that all EMT maintain current registration with the National Registry of Emergency Medical Technicians.	REMOVE Rule Remove language to reflect current application for certification practice.
<u>Rule 6.11.3</u>	<u>All EMTs failing to re-certify with BEMS on or before the expiration date of his/her certification period will be considered officially expired.</u>	REMOVE Rule Remove language to reflect current application for certification practice.
Subchapter 13		
Rule 6.13.4 —	BEMS may withhold or deny an application for re-certification for a like period of time equal to the like period of time under which a person fails to comply.	REMOVE Rule Remove language to reflect current application for certification practice.
Subchapter 14 EMT, Grounds for Suspension or Revocation		

	Rule 6.14.1 Grounds for suspension or revocation include: 21. <u>Failure to comply with reporting requirements for submission of Patient Care Report to the BEMS containing Mississippi minimum EMS data set.</u>	MODIFIED RULE Modify language based on EMS Community and EMS Advisory Council to ensure proper patient care reporting.
Subchapter 20		
Rule 6.20.3	The person possessing the highest level of certification/license must attend the patient unless otherwise authorized by medical control or as otherwise specified by approved protocols.	MODIFIED RULE Modify language to reflect standards for other levels.
<u>Chapter 7 Ambulance Service Licensure</u>		
<u>Subchapter 1 Training Authority for AEMT</u>		
Subchapter 1	<u>Training Authority for AEMT</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 2 AEMT Curriculum</u>		
Subchapter 2	<u>AEMT Curriculum</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. (<i>AEMT National Education Standards</i>)
<u>Subchapter 3 Request for Approval of AEMT Training</u>		
Subchapter 3	<u>Request for Approval of AEMT Training</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 4 AEMT Training Curriculum</u>		
Subchapter 4	<u>AEMT Training Curriculum</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. (<i>AEMT National Education Standards</i>)

<u>Subchapter 5 AEMT classes, class approved</u>		
Subchapter 5	<u>AEMT classes, class approved</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 6 AEMT classes, initial roster</u>		
Subchapter 6	<u>AEMT classes, initial roster</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 7 AEMT classes, final roster</u>		
Subchapter 7	<u>AEMT classes, final roster</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 8 AEMT Training Programs, minimum admittance criteria</u>		
Subchapter 8	<u>AEMT Training Programs, minimum admittance criteria</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 9 AEMT Refresher Training</u>		
Subchapter 9	<u>AEMT Refresher Training</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. <i>(2016 National Core Competency Program)</i>
<u>Subchapter 10 Prerequisites to certification as an AEMT (training obtained in Mississippi).</u>		
Subchapter 10	<u>Prerequisites to certification as an AEMT (training obtained in Mississippi).</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. <i>(AEMT National Education Standards)</i>

<u>Subchapter 11 Prerequisites to certification as an AEMT (training obtained in another state)</u>		
Subchapter 11	<u>Prerequisites to certification as an AEMT (training obtained in another state)</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. <i>(AEMT National Education Standards)</i>
<u>Subchapter 12 AEMT Certification</u>		
Subchapter 12	<u>AEMT Certification</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 13 AEMT Re-certification</u>		
Subchapter 13	<u>AEMT Re-certification</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 14 AEMT, Grounds for Suspension or Revocation</u>		
Subchapter 14	<u>AEMT, Grounds for Suspension or Revocation</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 15 Description of the Occupation and Competency of the AEMT</u>		
Subchapter 15	<u>Description of the Occupation and Competency of the AEMT</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. <i>(National EMS Core Content; National Scope of Practice Model)</i>
<u>Subchapter 16 Job Summary</u>		
Subchapter 16	<u>Job Summary</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.

		<i>(National EMS Core Content; National Scope of Practice Model)</i>
<u>Subchapter 17 Functional Job Analysis</u>		
Subchapter 17	<u>Functional Job Analysis</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. <i>(National EMS Core Content; National Scope of Practice Model)</i>
<u>Subchapter 18 Physical demands</u>		
Subchapter 18	<u>Physical demands</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.
<u>Subchapter 19 Performance Standards for AEMT</u>		
Subchapter 19	<u>Performance Standards for AEMT</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. <i>(National EMS Core Content; National Scope of Practice Model)</i>
<u>Subchapter 20 Area and Scope of Practice of the AEMT</u>		
Subchapter 20	<u>Area and Scope of Practice of the AEMT</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT. <i>(National EMS Core Content; National Scope of Practice Model)</i>
<u>Subchapter 21 AEMT, Grounds for Suspension or Revocation</u>		
Subchapter 21	<u>AEMT, Grounds for Suspension or Revocation</u>	NEW RULE To add language to authorized training authority for newest level of licensure – AEMT.

Chapter 7 8: Paramedic		
Subchapter 11: Prerequisites to certification as a Paramedic (training obtained in Mississippi).		
Rule 8.11.2	Completion of the Board's approved Paramedic Training Program (<i>Note: This includes passage of the National Registry Paramedic examination</i>)	Conflicts with Rule 8.11.2.
Rule 8.11.3	Must meet all Mississippi EMT criteria for certification. <u>Verification of current NREMT certification as a Paramedic.</u>	Conflicts with Rule 8.11.2.
Subchapter 12 Pre-requisites to certification Paramedic (training obtained in another state)		
Rule 8.12.1	Age of at least 18 years.	REMOVE Rule Remove language to reflect current application for certification practice.
Rule 8.12.2	An applicant must demonstrate a need for reciprocity by submitting a Jurisdictional Medical Control Agreement.	REMOVE Rule Remove language to reflect current application for certification practice.
Rule 8.12.3	Completion of a Paramedic program which meets the guidelines as approved by BEMS. A copy of the program curriculum and educational objectives must be submitted to and approved by the BEMS.	REMOVE Rule Remove language to reflect current application for certification practice.
Rule 8.12.4	Applicant must be registered as a Paramedic by the National Registry of EMTs. This is documented by submitting a copy of the National Registry wallet card to the BEMS. Must meet all Mississippi criteria for certification.	REMOVE Rule Remove language to reflect current application for certification practice.
Rule 8.12.5	All Paramedics trained prior to August 2011 must complete a MSDH. BEMS approved transitional course no later than March 31, 2015.	REMOVE Rule Remove language to reflect current application for certification practice.

Subchapter 13 Paramedic Level Re-certification Certification		
Rule 8.13.1	Any person desiring re -certification as Paramedic shall apply to BEMS using forms provided (e.g. application for state certification).	MODIFY Rule Modify language to reflect current application for certification process.
Rule 8.13.4	BEMS may withhold or deny an application for re-certification for a like period of time equal to the like period of time under which a person fails to comply.	REMOVE Rule Remove language to reflect current application for certification practice.
Subchapter 14 Paramedic, Grounds for Suspension or Revocation.		
Rule 8.14.1	Grounds for suspension or revocation include: <u>22. Failure to comply with reporting requirements for timely submission of Patient Care Report to the BEMS containing Mississippi minimum EMS data set</u>	MODIFIED RULE Modify language based on EMS Community and EMS Advisory Council to ensure proper patient care reporting.
Subchapter 17: Performance Standards for Paramedic Levels		
Rule 8.17.1	Performance Standards for Paramedic Level 4. Paramedics are permitted to monitor and administer only those IV fluids and/or medications which are approved by the BEMS and the Committee on Medical Direction, Training, and Quality Assurance (MDTQA). A current “Required and Approved EMS Fluids and Drugs List” is available from the BEMS office and on the BEMS website (www.ems.doh.ms.gov). Requests for additions or deletions from the list should be made in writing by the Offline Medical Director to the BEMS. Requests should detail the rational for the additions, modifications, or deletions 9. The BEMS and the Committee on Medical Direction, Training, and Quality Assurance (MDTQA) will compile a list of intravenous fluids and medications that may be initiated and transported by EMS providers in the State. The current list of	REMOVE Rule Remove language to reflect current EMS Scope of Practice for Paramedic. Repetitive language.

	<p>fluids and medications approved for initiation and transport by Mississippi EMS providers is available from the BEMS office or the BEMS website</p> <p>15.Note: In addition, Paramedics are allowed to administer any pharmaceutical that is approved in these Rules and Regulations; through any route that falls within the skill set taught consistent with the National Standard Curriculum; and approved by off line medical director.</p> <p>16.Paramedics should be familiar with all of the 41 classifications of medications as defined by the 1998 Paramedic National Standard Curriculum. Paramedics must be able to list indications, contraindications, actions, dosage, and route of administration of each of the fluids and medications on the “Approved and Required EMS Fluids and Drugs List” as compiled by the BEMS and the Committee on Medical Direction, Training, and Quality Assurance (MDTQA)</p> <p>29. In addition to the above skills, the <u>EMT-Paramedic</u> and the <u>EMT-Intermediate</u> should be well versed in pertinent anatomy, pathophysiology, history taking, physical examination, assessment and emergency treatment relating to:</p>	
Rule 8.17.2	<p>Optional skills: Performances of these skills are optional however, they must be taught in all training programs.</p>	<p>REMOVE Rule</p> <p>Remove language to reflect current EMS Scope of Practice for Paramedic. Rule 8.18.3</p>
Rule 8.17.3	<p>Other skills</p>	<p>REMOVE Rule</p> <p>Remove language to reflect current EMS Scope of Practice for Paramedic. Rule 8.18.3</p>
Subchapter 18: Performance Standards for Paramedic (After March 31, 2015)		
Rule 8.18.1	<p>The Paramedic who functions within the State of Mississippi, must be able to demonstrate the skills as listed in the National EMS Education Standards – Paramedic Instruction Guidelines and the</p>	<p>MODIFY Language</p> <p>Modify to reflect National EMS Education Standards.</p>

	2011 Mississippi Curriculum Framework— Postsecondary Paramedic to the satisfaction of the EMS medical director and the BEMS, Mississippi State Department of Health, to meet criterion established for advanced life support personnel.	
Rule 8.18.2	a. NOTE: The BEMS and the Committee on Medical Direction, Training, and Quality Assurance (MDTQA) will compile a list of intravenous fluids and medications that may be initiated and transported by EMS providers in the State. The current list of fluids and medications approved for initiation and transport by Mississippi EMS providers is available from the BEMS office or the BEMS website(www.health.ms.gov) b. Requests for additions or deletions from the list should be made in writing by the Offline Medical Director to the BEMS. Requests should detail the rationale for the additions, modifications, or deletions	MODIFY Rule Remove repeated language found in Rule 8.17.1.
Rule 8.18.3	Optional skills: Performances of these skills are optional however, they must be taught in all training programs. 4. Drug Assisted Intubation, using <u>MDTQA approved medications for this procedure</u> benzodiazepine class drugs , in strict adherence with the following measures.	MODIFIED RULE Modify to allow MDTQA to approved medications based on current evidence based medical practice.
Chapter 10: Critical Care Paramedic Subchapter 2: Request for Approval of Critical Care Paramedic Training Programs		
10.2.4.	Instructor qualifications: Critical Care Paramedic Program Coordinator: 1. <u>Must be an existing Accredited Mississippi ALS Program coordinator or Licensed or Certified Flight Paramedic (FP-C) or Register Nurse with EMS experience or Critical Care Paramedic (CCP) for a minimum of two years. The Program Director and Instructors must be comfortable with the majority of the lecture components and skill stations, and can answer questions with credibility. Instructors must be knowledgeable regarding new</u>	MODIFIED RULE Modify language based on EMS Community and EMS Advisory Council to provide Critical Care Paramedic training in the Community College System.

	<p><u>developments in emergency medical services and critical care through reading, research, professional organizations, and continuing academic training. They must be strong in oral and written communication skills and relate well to a variety of professional disciplines.</u></p> <p>a. CV must be submitted and held on file by the program director of the sponsoring Advanced Life Support program.</p> <p>b. Minimum of five years experience as a Paramedic (minimum of three years to be in critical care transport).</p> <p>c. Minimum of three years teaching experience.</p> <p>d. Current certifications in:</p> <p>i. American Heart Association (AHA) Advanced Cardiac Life Support (ACLS)</p> <p>ii. AHA Pediatric Advanced Life Support (PALS), Emergency Pediatric Care (EPC) or Pediatric Education for Prehospital Professionals (PEPP)</p> <p>iii. Prehospital Trauma Life Support (PHTLS) or equivalent course.</p> <p>e. Current Mississippi Critical Care Paramedic</p> <p><i>Note: Until January 1, 2016, Critical Care Paramedic Program Coordinator may substitute number Rule 9.2.4.1.e. with current Mississippi-certified Paramedic credentials.</i></p>	
Rule 10.2.5	Facility Requirements	<p>MODIFIED RULE</p> <p>Modify language based on EMS Community and EMS Advisory</p>

	<p>5. Have in effect formal agreement(s) with medical center(s) offering the following services.</p> <p>b. Comprehensive Stroke Center:</p>	Council to provide Critical Care Paramedic training in the Community College System.
<u>Rule 10.11.22</u>	<p><u>Failure to comply with reporting requirements for timely submission of Patient Care Reports to the BEMS containing Mississippi minimum EMS data set.</u></p>	<p>MODIFIED RULE</p> <p>Modify language based on EMS Community and EMS Advisory Council to ensure proper patient care reporting.</p>
APPENDIX I – MEDICAL DIRECTION: STANDARD PRACTICE FOR QUALIFICATIONS, RESPONSIBILITIES, AND AUTHORITY		
<p>Authority of an off-line Medical Director includes, but is not limited to:</p> <p>4. Ensure the competency of personnel who provide on-line medical direction to out-of-hospital personnel including, but not limited to, physicians, EMTs, <u>Advanced EMTs</u>, Paramedics and nurses.</p>		<p>NEW Language</p> <p>To add language to authorized medical direction authority for newest level of licensure – AEMT. <i>(National EMS Core Content; National Scope of Practice Model)</i></p>
APPENDIX 9 – GLOSSARY		
<p><u>“Advanced EMT: - a person providing basic and limited advanced emergency care and transportation for critical and emergent patients who access the emergency medical system. This individual possess the basic knowledge and skills necessary to provide patient care and transportation. AEMT function as a part of a comprehensive EMS response, under medical oversight. AEMTs perform interventions with the basic and advanced equipment typically found on an ambulance. (National EMS Scope of Practice Model) AEMTs must possess valid licensed issued by the BEMS.</u></p>		<p>NEW Language</p> <p>To add language to define newest level of licensure – AEMT. <i>(National EMS Core Content; National Scope of Practice Model)</i></p>
<p>"Advanced Life Support Services" - shall mean implementation of the 15 components of an EMS system to a level capability which provides noninvasive and invasive emergency patient care designed to optimize the patient's chances of surviving the emergency situation. Services shall include use of sophisticated transportation vehicles, a communications capability (two-way voice and/or biomedical telemetry) and staffing by Emergency Medical Technician-Intermediates or Emergency Medical Technician-Advanced</p>		<p>MODIFY Language</p> <p>To modify language to define Advanced Life Support Services to include newest level of licensure – AEMT. <i>(National EMS Core Content; National Scope of Practice Model)</i></p>

EMTs and Paramedics providing on-site, pre-hospital mobile and hospital intensive care under medical control.	
"EMS Personnel" - Key individual EMS providers. This includes physician, emergency and critical care nurse, EMT-Basic, EMT-Intermediate, EMT-, Advanced EMT, Paramedic, dispatchers, telephone screeners, first aid responders, project administrators and medical consultants and system coordinators.	MODIFY Language To modify language to define EMS Personnel to include newest level of licensure – AEMT. <i>(National EMS Core Content; National Scope of Practice Model)</i>
"Emergency medical technician" - shall mean an individual who possesses a valid emergency medical technicians certificate issued pursuant to the provisions of this chapter. A person providing out of hospital emergency medical care and transportation for critical and emergent patients who access the EMS system. EMTs have the basic knowledge and skills necessary to stabilize and safely transport patients ranging from non-emergency and routine medical transports to life threatening emergencies. EMTs function as part of a comprehensive EMS system, under medical oversight. EMTs perform interventions with the basic equipment found on an ambulance. (National EMS Scope of Practice Model) EMTs must possess valid licensed issued by the BEMS.	NEW Language To add language to define EMT. <i>(National EMS Core Content; National Scope of Practice Model)</i>
" Emergency medical technician-intermediate" shall mean a person specially trained in advanced life support modules as authorized by the Mississippi State Department of Health.	REMOVE Language To remove old language defining level no longer recognized. <i>(National EMS Core Content; National Scope of Practice Model)</i>
" Emergency medical technician-paramedic" shall mean a person specially trained in an advanced life support training program authorized by the Mississippi State Department of Health.	REMOVE Language To remove old language to define Paramedic. <i>(National EMS Core Content; National Scope of Practice Model)</i>
"Medical Director" - (off line, administrative) should be a physician both credible and knowledgeable in EMS systems planning, implementation, and operations. The administrative (off-line) medical director in conjunction with the supervisory ALS (on line) medical directors of each	NEW Language To add language to authorized medical direction authority for newest level of licensure – AEMT.

<p>Base Station Hospital, medical directors for paramedic services, medical director for EMS training, and critical care consultants develop all area protocols. These protocols serve as the basis for EMS system role definition of ALS <u>EMS</u> personnel, curriculum development, competency determination, and maintenance, monitoring, and evaluation.</p>	<p><i>(National EMS Core Content; National Scope of Practice Model)</i></p>
<p>"On-Line (Supervising ALS) Medical Director" - On-Line medical control is provided through designated Primary Resource and Base Station Hospitals under the area direction of a supervisory ALS medical director who is on-line to the pre-hospital system stationed at the designated Base Station Hospital.</p> <p>The ALS (on-line) medical director in conjunction with the EMS training medical director reviews paramedics, intermediates <u>Advanced EMTs, EMTs</u>, mobile intensive care nurses, and physician competencies and recommends certification, re-certification, and decertification of these personnel to the EMS health officer of the lead agency responsible for the certification decertification, and recertification of EMS personnel. Monitoring the competency of all pre-hospital EMS personnel activities is within his responsibility.</p>	<p>NEW Language</p> <p>To add language to authorized medical direction authority for newest level of licensure – AEMT.</p> <p><i>(National EMS Core Content; National Scope of Practice Model)</i></p>
<p><u>"Paramedic" - an allied health professional whose primary focus is to provide advanced emergency medical care for critical and emergent patients who access the emergency medical system. This individual possesses the complex knowledge and skills necessary to provide patient care and transportation. Paramedics function as part of a comprehensive EMS response, under medical oversight. Paramedics perform interventions with the basic and advanced equipment typically found on an ambulance. (National EMS Scope of Practice Model) Paramedics must possess valid licensed issued by the BEMS.</u></p>	<p>NEW Language</p> <p>To add language to define Paramedic.</p> <p><i>(National EMS Core Content; National Scope of Practice Model)</i></p>